




Facility provider maintenance

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Current functionality as of December 2025

- Update EFT information.
- Update remittance information.
- Terminate facility.
- Facility name change.
- Change primary address.
- Change remittance address.
- Change/add:
 - Billing address.
 - Correspondence address.
 - Medical records address.
 - IVR.
 - Alternate site addresses.
 - Contacts.
- View status of request.
- Provider attestation.



Close

Please select your Tax ID

Select one ▼

Participating Provider First Tier, Downstream, and Related Entity (FDR) Annual Attestation Form

Next

The provider will be identified at Availity® log in and the Tax ID drop down will populate based on the login information.

Select the appropriate Tax ID for review and click *Next*. If multiple Tax IDs exist, select the Tax ID to be reviewed from the drop down and click *Next*.

Back to selection

Update Electronic Funds Transfer

Update Remittance Information

View Request Status by Tax ID

Update Network Info

Mergers / Acquisitions

Terminate Facility

Last Attested on: 01/20/2026

Attestation due: 04/20/2026

Update Attestations

Facilities for Tax ID Close

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type

Showing 1 to 1 of 1 entries Previous 1 Next

After a TIN is selected, the main provider selection screen is displayed. To make any selections, first enter the requestor name, requestor email, and requestor phone number. Requestor title and requestor fax number are optional fields. Once the requestor information is entered, select a specific facility or go directly to update or submit any requests options by selecting the appropriate selection on the left side toolbar. Click *Back to selection* (left side toolbar) to return to the Tax ID selection screen.

Notes:



- In the top right of each screen is the *Close* option. *Close* will exit the user completely from the tool.
- Required fields are denoted with an asterisk.

Electronic funds transfer

Back to selection
Facilities for Tax ID Close

Update Electronic Funds Transfer

Update Remittance Information

View Request Status by Tax ID

Update Network Info

Mergers / Acquisitions

Terminate Facility

Last Attested on:
01/20/2026

Attestation due:
04/20/2026

Update Attestations

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name

Requestor Email

Requestor Phone Number

Requestor Title

Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type

Showing 1 to 1 of 1 entries Previous 1 Next

To Update Electronic Funds Transfer (EFT) information, once the requestor information is entered, select *Update Electronic Funds Transfer* selection from the left side toolbar.

Electronic Funds Transfer
Close

Facilities for Tax ID (* indicates required fields)

*Effective Date for requested change

*Routing Number

*Account Number

*Account Type
 Savings
 Checking

*Bank Name

Select all

Select	Facility Name	Facility NPI	CBC Facility ID	Facility Type	Routing Number	Account Number	EFT Status	Effective Date	Remittance Status
<input type="checkbox"/>							Current EFT	02/06/2024	Electronic Remittance and 835

Showing 1 to 1 of 1 entries

Provider agrees to submit a new EFT authorization Form and give a thirty (30) day prior written notice to Capital Blue Cross of any changes in its depository information, ABA number, other payment instructions, or any changes in information on this form (such as a new provider contact person, etc.).

Current EFT settings are displayed along with a list of providers under the TIN. To change or add banking information, enter the effective date (will auto populate with today's date, but is updatable), Bank Routing Number, Account Number, and Account Type. Select *Search*, if Bank Name is available, it will auto-populate otherwise Bank Name will be a freeform text box where data will need to be entered. Changes can be applied to individual providers or to all providers under the TIN by clicking *Select all*. The user must attest to the change by clicking the attestation box prior to selecting *Update*. Click *Update* to process the request which will return user to the Main Screen. Click *Cancel* to discard the request and return to the main menu.

Remittance

Back to selection
Close

[Update Electronic Funds Transfer](#)
[Update Remittance Information](#)
[View Request Status by Tax ID](#)
[Update Network Info](#)
[Mergers / Acquisitions](#)
[Terminate Facility](#)

Last Attested on:
01/20/2026

Attestation due:
04/20/2026

[Update Attestations](#)

Facilities for Tax ID

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name

Requestor Email

Requestor Phone Number

Requestor Title

Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type

Showing 1 to 1 of 1 entries
Previous Next

To update remittance information, once the requestor information is entered, select *Update Remittance Information* selection from the left side toolbar.

Remittance
Close

Facilities for Tax ID (* indicates required fields)

*Effective Date for requested change

Electronic Remittance

Select all

Select	Facility Name	Facility NPI	CBC Facility ID	Facility Type	Effective Date	Remittance
<input type="checkbox"/>						Electronic Remittance and 835
<input type="checkbox"/>						Electronic Remittance and 835
<input type="checkbox"/>						Electronic Remittance and 835

Showing 1 to 3 of 3 entries

Current remittance settings are displayed for all providers under the TIN. To make a change, enter the change effective date and click *Electronic Remittance*. Changes can be applied by provider or to all providers under the TIN by clicking *Select all*. Click *Update* to process the request. Click *Cancel* to discard the request and return to the main menu.

Terminate facility

Back to selection

Update Electronic Funds Transfer

Update Remittance Information

View Request Status by Tax ID

Update Network Info

Mergers / Acquisitions

Terminate Facility

Last Attested on:
01/20/2026

Attestation due:
04/20/2026

Update Attestations

Facilities for Tax ID

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type

Showing 1 to 1 of 1 entries Previous 1 Next

To terminate facility once the Requestor information is entered, select *Terminate Facility* selection from the left side toolbar.

Terminate Facility

Facilities for Tax ID

*Termination Effective Date
01/20/2026

*Termination reason
Select one

*Is this the result of an acquisition or merger?
 Yes
 No

Select all

Select	Facility Name	Facility NPI	CBC Facility ID	Facility Type
<input type="checkbox"/>				

Showing 1 to 1 of 1 entries

Terminate Cancel

*Termination reason

Select one

- Select one
- Existing Provider Merger
- Practice dissolving/closing

To terminate a facility, enter the termination effective date and select a termination reason. The termination can be applied to an individual facility or to all facilities under the TIN by checking the select all box. Is this change the result of a TIN change, acquisition, or merger? If the answer is yes, click the existing group ID search. Search by NPI or search by name, then select *Search*, which will return provider results (images below). Click *Terminate*, to process the request. Click *Cancel* to discard the request and return to the main menu.

*Is this the result of an acquisition or merger?

- Yes
- No

New Facility ID from search

New Facility Group Name from search

New Facility ID Search

If the answer is yes for the question, 'Is this the result of an acquisition or merger?' New Facility ID search option will be displayed and is required. Facility should be termed after the new facility is created. Select *New Facility ID Search* which will bring you to the existing provider search function.

Existing Provider Search

Search by NPI

Search by Name (do not use wild cards)

Search

- Trans id:

Back

Enter criteria for the new facility and click *Search*. *Back* will take you back to the termination screen allowing updates to the information provided.

Existing Provider Search

Search by NPI

Search by Name (do not use wild cards)

Search

Select	Provider ID	NPI	Provider Name
Select			

Select the correct new facility ID and click *Back* to go back to the terminate facility screen. Once the request is completed, click *Terminate*, to process the request and return to the main menu. Click *Cancel* to discard the request and return to the main menu.

Facilities by tax ID

Back to selection

Update Electronic Funds Transfer

Update Remittance Information

View Request Status by Tax ID

Update Network Info

Mergers / Acquisitions

Terminate Facility

Last Attested on:
01/20/2026

Attestation due:
04/20/2026

Update Attestations

Facilities for Tax ID

Close

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type
<input type="text"/>			

Showing 1 to 1 of 1 entries Previous Next

To access specific provider information such as tax information, facility name changes, addresses, contacts, and networks, click on a facility highlighted in blue, located under the name column.

Tax information

- [Return to Main Selection](#)
- [Tax / Facility Information](#)
- [Facility Name Change](#)
- [+ Facility Addresses](#)
- [IVR Number](#)
- [Additional Site Locations](#)
- [Contacts](#)
- [Networks](#)
- [View Request Status](#)

Tax Info Close

Tax ID	Tax Entity			
<input type="text"/>	<input type="text"/>			
Address Line 1	Address Line 2			
<input type="text"/>	<input type="text"/>			
City	State	Zip Code	County	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone Number	Ext	Fax Number	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Tax / Facility Information displays the selected facility tax information. The tax information screen is read-only. Any tax changes should be communicated through the Facility Provider Engagement Consultant. If you are unsure which provider entanglement consultant is assigned to your practice, this is available in the Contacts section located on the left side toolbar.

Facility information

The image shows a navigation menu on the left with the following items: 'Return to Main Selection', 'Tax / Facility Information' (highlighted with an orange border), 'Facility Name Change', '+ Facility Addresses', 'IVR Number', 'Additional Site Locations', 'Contacts', 'Networks', and 'View Request Status'. To the right is the 'Tax Info' form, which includes fields for Tax ID, Tax Entity, Address Line 1, Address Line 2, City, State, Zip Code, County, Phone Number, Ext, Fax Number, and Email. A 'Close' button is located in the top right corner of the form.

To access specific provider information select on a facility highlighted in blue, located under the name column.

The facility information screen displays high-level provider information. Data points that the provider can change are NPI, and ANPI. To change the NPI, enter the new NPI and click *search NPPES for NPI*.

The 'Facility Info' form contains the following fields and controls: Facility Name, Facility Type, CBC ID, Taxonomy, NPPES NPI Search Value, NPPES Name, a 'Search NPPES for NPI' button, 'Use for Primary NPI' and 'Use for Additional NPI' buttons, '*Primary NPI' and 'Previous Primary NPI' fields, and a section titled 'What will be done with the previous Primary NPI?' with three radio button options: 'We will continue to submit claims', 'Retain for claims runout', and 'Nothing, terminate immediately'. Below these is a table with columns 'Additional NPI' and 'Status', containing the text 'No data available in table'. At the bottom, it says 'Showing 0 to 0 of 0 entries', '- Trans id:', and 'Update' and 'Reset' buttons.

If the NPI is found on NPPES, the NPPES name is returned. The provider can then decide to use the new NPI as the primary NPI or Additional NPI (ANPI). If primary is selected, choose one of the three options instructing how to handle the previous primary NPI. For 'We will continue to submit claims' selection, the NPI would be retained as an Additional NPI (ANPI). 'Retain for claims runout' would add previous NPI as an historical NPI (HNPI). 'Nothing, terminate immediately' will delete the NPI from the record. The user can also make changes to their Additional NPIs (ANPIs) by changing the current ANPI status: Active, Terminate but retain for claims runout or Terminate immediately. Click *Update* to submit the change. *Reset* will discard any changes and return the screen to its original state. At any time, making another selection from the left navigation box will also discard changes.

Facility name change

- Return to Main Selection
- Tax / Facility Information
- Facility Name Change**
- + Facility Addresses
- IVR Number
- Additional Site Locations
- Contacts
- Networks
- View Request Status

Tax Info Close

Tax ID Tax Entity

Address Line 1 Address Line 2

City State Zip Code County

Phone Number Ext Fax Number Email

To access specific provider information select on a facility highlighted in blue, located under the name column..

Select *Facility Name Change*.

Facility Info

Facility Name Facility Type

CBC ID Taxonomy

Primary NPI Previous Primary NPI

Additional NPI	Status
No data available in table	

Showing 0 to 0 of 0 entries

- Trans id:

Enter the updated DBA name under facility name. Click *Update* to submit the change. Click *Cancel* to return to the main screen without submitting any updates.

Primary address

- Return to Main Selection
- Tax / Facility Information
- Facility Name Change
- Facility Addresses
 - Primary
- Billing
- Correspondence
- Medical Records
- Remittance
- IVR Number
- Additional Site Locations
- Contacts
- Networks
- View Request Status

Tax Info Close

Tax ID	Tax Entity		
<input type="text"/>	<input type="text"/>		
Address Line 1	Address Line 2		
<input type="text"/>	<input type="text"/>		
City	State	Zip Code	County
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number	Ext	Fax Number	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Facility Info

Facility Name	Facility Type
<input type="text"/>	<input type="text"/>
CBC ID	Taxonomy
<input type="text"/>	<input type="text"/>

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select *Primary*, under facility addresses section.

- Return to Main Selection
- Tax / Facility Information
- Facility Name Change
- + Facility Addresses
- IVR Number
- Additional Site Locations
- Contacts
- Networks
- View Request Status

Primary Address
Close

(* indicates required fields)

*Address Line 1 Address Line 2

*City *State *Zip Code *County

Zip Code Lookup: Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code.

Standardize Address: Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards.

For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.

*Is this change the result of a TIN change, acquisition or merger?

Yes
 No

*Effective Date for requested change
 Effective date applies to address above.

*Phone Number Ext *Fax Number Email

Web address

Handicapped Accessible? Yes No Print In Directory? Yes No

Current active primary address information is displayed. The primary address can be updated but not terminated. The change effective date defaults to the current date, can be updated. Users are required to answer the following question when making changes to an address: Is this change the result of a TIN change, acquisition, or merger? If the answer is yes, click the existing group ID search (images below). Search by NPI or search by name, then select search, which will return provider results. Select the match from the provider search function. Selecting the back button will return to the previous page.

*Is this change the result of a TIN change, acquisition or merger?

Yes
 No

Existing Group ID from search

Existing Group Name from search

Existing Provider Search

Search by NPI

Search by Name (do not use wild cards)

Search

- Trans id:

Back

Existing Provider Search

Search by NPI

Search by Name (do not use wild cards)

Search

Select	Provider ID	NPI	Provider Name
Select			
Select			
Select			
Select			
Select			
Select			
Select			
Select			
Select			
Select			
Select			

Showing 1 to 10 of 131 entries Previous 1 2 3 4 5 ... 14 Next

- Trans id:

Back

ZIP Code lookup

Zip Code Lookup

Locations within Zip Code

Select	City	County
<input type="checkbox"/>	Camp Hill Brm	Cumberland
<input type="checkbox"/>	Camp Hill	Cumberland
<input type="checkbox"/>	Shiremanstown	Cumberland

Showing 1 to 3 of 3 entries

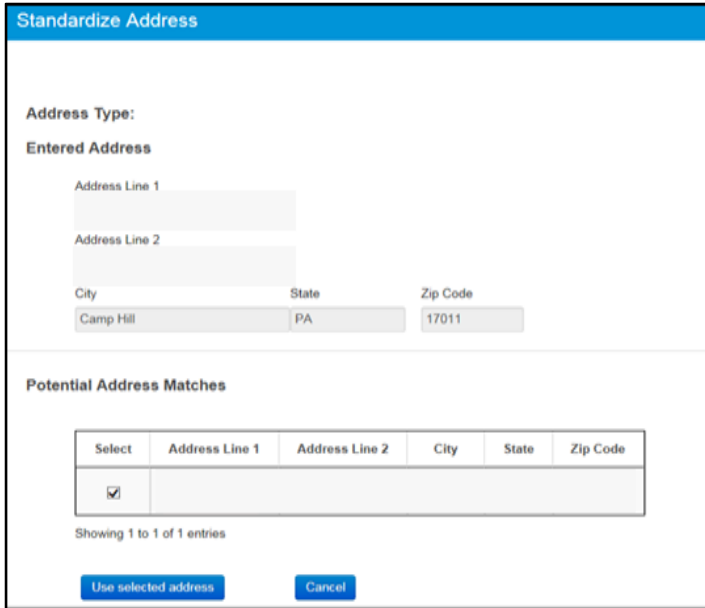
In order to perform a ZIP Code lookup, address line one and the ZIP Code must be entered into the main screen. After *ZIP Code Lookup* is clicked, the above box is displayed. Select which city and county are correct by clicking *Select* next to the appropriate row. Click *Use selected match* to return to the address screen. Click *Cancel* to close the box, discard any selections, and return to the address screen.



Note:

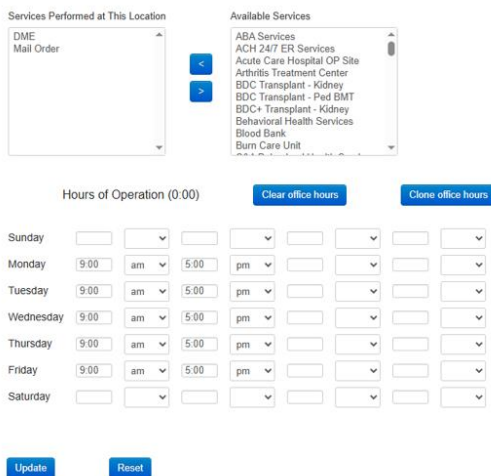
ZIP Code lookup is available on each of the address screens.

Standardize address



The 'Standardize Address' form is divided into two main sections. The top section, 'Entered Address', contains input fields for 'Address Line 1', 'Address Line 2', 'City', 'State', and 'Zip Code'. The 'City' field is populated with 'Camp Hill', 'State' with 'PA', and 'Zip Code' with '17011'. The bottom section, 'Potential Address Matches', features a table with columns for 'Select', 'Address Line 1', 'Address Line 2', 'City', 'State', and 'Zip Code'. A single row is visible with a checked checkbox in the 'Select' column. Below the table, it says 'Showing 1 to 1 of 1 entries'. At the bottom of the form are two buttons: 'Use selected address' and 'Cancel'.

Address standardization will align the entered address with USPS standards. If multiple addresses are found, multiple rows will appear. Select the desired address and click *Use selected address*. The standardized address box is closed, and the primary address screen is displayed.



This form is split into two main parts. The top part, 'Services', has two columns: 'Services Performed at This Location' and 'Available Services'. The 'Services Performed' column contains 'DME' and 'Mail Order'. The 'Available Services' column lists various medical services like 'ABA Services', 'ACH 24/7 ER Services', 'Acute Care Hospital OP Site', 'Arthritis Treatment Center', 'BDC Transplant - Kidney', 'BDC Transplant - Kidney - Ped BMT', 'BDC Transplant - Kidney', 'Behavioral Health Services', 'Blood Bank', and 'Burn Care Unit'. Two blue arrows point between the columns. Below this is the 'Hours of Operation (0.00)' section, which includes 'Clear office hours' and 'Clone office hours' buttons. A table allows setting hours for each day of the week (Sunday through Saturday) with dropdowns for start/end times and AM/PM. At the bottom are 'Update' and 'Reset' buttons.

Current services and office hours are displayed. Services can be added or removed by selecting a service from either the services performed at this location or available services box and using the center arrows to add or remove. Office hours can be entered by day or entered on Sunday; click *Clone office hours* to copy the same hours to all days. Click *Clear office hours* to delete all hours. Click *Update* to submit the request or *Reset* to discard any entries and return the screen to its original state.

Billing address

Return to Main Selection
Tax / Facility Information
Facility Name Change
- Facility Addresses
 Primary
 Billing
 Correspondence
 Medical Records
 Remittance
IVR Number
Additional Site Locations
Contacts
Networks
View Request Status

Tax Info Close

Tax ID Tax Entity

Address Line 1 Address Line 2

City State Zip Code County

Phone Number Ext Fax Number Email

Facility Info

Facility Name Facility Type

CBC ID Taxonomy

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select *Billing*, under Facility Addresses section.

Return to Main Selection
Tax / Facility Information
Facility Name Change
+ Facility Addresses
 IVR Number
 Additional Site Locations
 Contacts
 Networks
 View Request Status

Billing Address Close

(* indicates required fields)

*Address Line 1 Address Line 2

*City *State *Zip Code *County

Zip Code Lookup: Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code.
Standardize Address: Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards.
For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.

*Is this change the result of a TIN change, acquisition or merger?
 Yes
 No

*Effective Date for requested change
[01/20/2026] Effective date applies to address above.

Phone Number Ext Fax Number Email

Current active billing address information is displayed. The billing address can be updated, or a new address can be added if one does not exist. Standardization and the Merger Acquisition question are required on all Address Updates or Adding New address. Click *Add* to add a new billing address. To update existing addresses, the *Update* option will be displayed and when clicked, submits the request. Click *Reset* to return the screen to its original state and discard any updates.

Correspondence address

This address is used for mailing to the provider (letters, not checks).

The screenshot displays two main sections: 'Tax Info' and 'Facility Info'. The 'Tax Info' section contains the following fields: Tax ID, Tax Entity, Address Line 1, Address Line 2, City, State, Zip Code, County, Phone Number, Ext, Fax Number, and Email. The 'Facility Info' section contains: Facility Name, Facility Type, CBC ID, and Taxonomy. A sidebar on the left lists navigation options: Return to Main Selection, Tax / Facility Information, Facility Name Change, - Facility Addresses (with 'Correspondence' highlighted), Primary Billing, Medical Records, Remittance, IVR Number, Additional Site Locations, Contacts, Networks, and View Request Status.

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select *Correspondence*, under Facility Addresses section.

The 'Correspondence Address' form includes the following fields and controls: Address Line 1, Address Line 2, City, State (dropdown menu), Zip Code, and County. It also features a 'Zip Code Lookup' button, a 'Standardize Address' button, and a section for 'Effective Date for requested change' with a date field set to 12/13/2021. At the bottom, there are 'Update' and 'Reset' buttons. The form also includes instructions for 'Zip Code Lookup' and 'Standardize Address'.

Current active correspondence address information is displayed. The correspondence address can be updated, or a new address can be added if one does not exist. Standardization and merger acquisition questions are required on all address updates or adding a new address. Click *Update* to submit the request. If a correspondence address did not exist, an *Add* option is displayed. Enter the address and click *Add* to submit the request. Click *Reset* to return the screen to its original state and discard any updates.

Medical records address

This address is for the location and contact names of where the medical records are stored.

The screenshot shows a web application interface. On the left is a vertical sidebar menu with the following items: 'Return to Main Selection', 'Tax / Facility Information', 'Facility Name Change', '- Facility Addresses' (highlighted with a red box), 'Primary', 'Billing', 'Correspondence', 'Medical Records' (highlighted with a red box), 'Remittance', 'IVR Number', 'Additional Site Locations', 'Contacts', 'Networks', and 'View Request Status'. To the right of the sidebar are two form panels. The top panel is titled 'Tax Info' and contains fields for 'Tax ID', 'Tax Entity', 'Address Line 1', 'Address Line 2', 'City', 'State', 'Zip Code', 'County', 'Phone Number', 'Ext', 'Fax Number', and 'Email'. The bottom panel is titled 'Facility Info' and contains fields for 'Facility Name', 'Facility Type', 'CBC ID', and 'Taxonomy'.

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select Medical Records, under Facility Addresses section.

The screenshot shows the 'Medical Records Address' form. The left sidebar is the same as in the previous image. The main form area has a blue header with the title 'Medical Records Address' and a 'Close' button. Below the header, there is a note: '(* indicates required fields)'. The form contains several sections: 'Address Line 1' and 'Address Line 2' fields; '*City', '*State', '*Zip Code', and '*County' fields; a 'Zip Code Lookup' section with instructions: 'Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code.'; a 'Standardize Address' section with instructions: 'Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards.'; a note: 'For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.'; two buttons: 'Zip Code Lookup' and 'Standardize Address'; a question: '*Is this change the result of a TIN change, acquisition or merger?' with radio buttons for 'Yes' and 'No'; an '*Effective Date for requested change' field with the value '01/20/2025' and the text 'Effective date applies to address above.'; '*Phone Number', 'Ext', 'Fax Number', and '*Email' fields; a 'Medical Records Contact' section with '*First Name', '*Last Name', and 'Middle Initial' fields; a 'Title' field; and '*Phone', 'Phone Ext', and 'Fax' fields. At the bottom of the form are 'Update' and 'Reset' buttons.

Current active medical records address information is displayed. The address can be updated, or a new address can be added if one does not exist. If an address did not exist, an add option is displayed. Standardization and merger acquisition questions are required on all address updates or adding a new address. Click *Update* to submit the request. If a medical records address did not exist, an *Add* option is displayed. Enter the address and click *Add* to submit the request. Click *Reset* to return the screen to its original state and discard any updates.

Remittance address

This is used when information needs to be mailed to the provider regarding payments or tax documents.

Return to Main Selection
Tax / Facility Information
Facility Name Change
- Facility Addresses
 Primary
 Billing
 Correspondence
 Medical Records
 Remittance
IVR Number
Additional Site Locations
Contacts
Networks
View Request Status

Tax Info Close

Tax ID Tax Entity
[] []

Address Line 1 Address Line 2
[] []

City State Zip Code County
[] [] [] []

Phone Number Ext Fax Number Email
[] [] [] []

Facility Info

Facility Name Facility Type
[] []

CBC ID Taxonomy
[] []

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select Remittance Address, under Facility Addresses section.

Return to Main Selection
Tax / Facility Information
Facility Name Change
+ Facility Addresses
 IVR Number
 Additional Site Locations
 Contacts
 Networks
 View Request Status

Remittance Address Close

(* Indicates required fields)

*Address Line 1 Address Line 2
[] []

*City *State *Zip Code *County
[] PA [] []

Zip Code Lookup: Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code.

Standardize Address: Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards.

For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.

*Is this change the result of a TIN change, acquisition or merger?
 Yes
 No

*Effective Date for requested change
12/13/2021 *Effective date applies to address above.*

Phone Number Ext Fax Number Email
[] [] [] []

Current active remittance address information is displayed and can be updated but not terminated. Standardization and merger acquisition questions are required on all address updates or adding a new address. Click *Update* to submit the request. Click *Reset* to return the screen to its original state and discard any updates.

Interactive Voice Response (IVR) numbers

This fax number is used by Capital Blue Cross clinical staff for all preauthorization.

Return to Main Selection
Tax / Facility Information
Facility Name Change
- Facility Addresses
Primary
Billing
Correspondence
Medical Records
Remittance
IVR Number
Additional Site Locations
Contacts
Networks
View Request Status

Tax Info

Close

Tax ID	Tax Entity		
<input type="text"/>	<input type="text"/>		
Address Line 1	Address Line 2		
<input type="text"/>	<input type="text"/>		
City	State	Zip Code	County
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number	Ext	Fax Number	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Facility Info

Facility Name	Facility Type
<input type="text"/>	<input type="text"/>
CBC ID	Taxonomy
<input type="text"/>	<input type="text"/>

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select IVR number.

Return to Main Selection
Tax / Facility Information
Facility Name Change
+ Facility Addresses
IVR Number
Additional Site Locations
Contacts
Networks
View Request Status

Interactive Voice Response (IVR) Numbers

Close

There are no IVR numbers on file

[New IVR number](#)

IVR is a dedicated fax number for the **secure** faxing of any documents containing protected Personal Health Information.

All active Interactive Voice Response (IVR) numbers are displayed. To make a change to an existing number, click *View More*. To add a new IVR number, click *New IVR number*.

Update Interactive Voice Response (IVR) Numbers

(* indicates required fields)

* Location

* Fax

* Effective Date for requested change

*Notification Date for requested change

*Description (500 characters max)

Termination reason (if applicable, max 255 characters.)

Add Interactive Voice Response (IVR) Number

(* indicates required fields)

* Location

* Fax

* Effective Date for requested change

Once *View More* is clicked the update IVR number screen is displayed. On this screen, change the current location, fax, and enter the change effective date.

This screen can also be used to terminate the number. To terminate a number, a termination reason must be entered. Click *Update* to submit the change request, *Terminate* to terminate the current IVR number, or *Cancel* to discard the request and return to the main IVR screen.

To Add new enter location, fax and the effective date. The requested effective date defaults to the current date but may be changed to a past or future date. Click *Add* to submit the change request or *Cancel* to discard the request and return to the main IVR screen.

Additional site locations

Return to Main Selection

Tax / Facility Information

Facility Name Change

- Facility Addresses

Primary

Billing

Correspondence

Medical Records

Remittance

IVR Number

Additional Site Locations

Contacts

Networks

View Request Status

Tax Info

Close

Tax ID Tax Entity

Address Line 1 Address Line 2

City State Zip Code County

Phone Number Ext Fax Number Email

Facility Info

Facility Name Facility Type

CBC ID Taxonomy

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select Additional Site Locations.

Return to Main Selection

Tax / Facility Information

Facility Name Change

+ Facility Addresses

IVR Number

Additional Site Locations

Contacts

Networks

View Request Status

Additional Site Locations

Close

Filter by City All Filter by Zip Code All Filter by County All

Location	City	State	Zip	County	
					<input type="button" value="View More"/> <input type="button" value="Export to Primary"/>

Showing 1 to 1 of 1 entries Previous Next

Additional site locations are displayed and can be filtered by city, ZIP Code, or county. Once the desired address is found, click *View More* to display the full address where it can be updated or terminated. Click *New Additional Site* to display a blank additional site location screen and enter address information.

Additional Site Location

(* indicates required fields)

*Address Line 1 Address Line 2

*City *State *Zip Code *County

Zip Code Lookup: Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code.

Standardize Address: Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards.

For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.

[Zip Code Lookup](#) [Standardize Address](#)

*Is this change the result of a TIN change, acquisition or merger?
 Yes
 No

*Effective Date for requested change
 Effective date applies to address above.

*Phone Number Ext *Fax Number Public Facing Email

Web address

Handicapped Accessible? Yes No [Print in Directory?](#) Yes No

Services Performed at This Location

Available Services

- ABA Services
- ACH/24/7 ER Services
- Acute Care Hospital OP Site
- Arthritis Treatment Center
- BDC Transplant - Kidney
- BDC Transplant - Post BMT
- BDC Transplant - Kidney
- Behavioral Health Services
- Blood Bank
- Bum Care Unit

Additional site information is displayed. On this page, update existing information, change handicap and directory indicators, and add or remove services. The change effective date defaults to the current date but can be updated. For the best experience, use the ZIP Code lookup to help with city and county combination. Standardize address is required for all addresses.

Hours of Operation (0:00) [Clear office hours](#) [Clone office hours](#)

Sunday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Monday	12:00	pm	4:00	pm	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tuesday	9:00	am	3:30	pm	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wednesday	9:00	am	3:30	pm	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Thursday	9:00	am	3:30	pm	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Friday	9:00	am	3:30	pm	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Saturday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[Update](#) [Terminate](#) [Cancel](#)

Termination reason (If applicable, max 255 characters.)

Current office hours are displayed. Office hours can be entered by day or entered on Sunday. Click *Clone office hours*, to copy the same hours to all days or *Clear office hours* to delete all hours. Click *Update* to submit the request or *Terminate* to term the existing site as of the change effective date. A termination reason must be entered, or an error message will be received. Click *Cancel* to discard any entries and return to the main additional site location screen.

Facility contacts

Return to Main Selection
Tax / Facility Information
Facility Name Change
- Facility Addresses
 Primary
 Billing
 Correspondence
 Medical Records
 Remittance
IVR Number
Additional Site Locations
Contacts
Networks
View Request Status

Tax Info

Close

Tax ID Tax Entity

Address Line 1 Address Line 2

City State Zip Code County

Phone Number Ext Fax Number Email

Facility Info

Facility Name Facility Type

CBC ID Taxonomy

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select Contacts.

Return to Main Selection
Tax / Facility Information
Facility Name Change
+ Facility Addresses
IVR Number
Additional Site Locations
Contacts
Networks
View Request Status

Facility Contacts

Close

Contact Name	Title	Role	Phone	Phone Ext	Fax
Call Center,	Provider Relations Consultant	Provider Relations Consultant	866-688-2242		

Showing 1 to 3 of 3 entries Previous 1 Next

[New Contact](#)

Existing contact information is displayed. To update a contact, click the *Contact Name* highlighted in blue, under the Contact Name column. To add a new contact, click *New Contact*. All contacts are updatable except the Provider Relations Consultant.

Once new contact is clicked, the add contact screen is displayed. To add a contact, complete the required fields and click *Add*. And return to the main contact screen. The contact information is added immediately. Click *Cancel* to discard the entry and return to the main contact screen.

Contact information can be updated or deleted. To update, change the existing information. Changes are made immediately. Click *Update* to submit the request, *Delete* to remove the contact, or *Cancel* to discard changes and return to the main contact screen.

Networks

Return to Main Selection

Tax / Facility Information

Facility Name Change

- Facility Addresses

Primary

Billing

Correspondence

Medical Records

Remittance

IVR Number

Additional Site Locations

Contacts

Networks

View Request Status

Tax Info Close

Tax ID Tax Entity

Address Line 1 Address Line 2

City State Zip Code County

Phone Number Ext Fax Number Email

Facility Info

Facility Name Facility Type

CBC ID Taxonomy

To access specific provider information select on a facility highlighted in blue, located under the name column.

Select Networks

Return to Main Selection

Tax / Facility Information

Facility Name Change

+ Facility Addresses

IVR Number

Additional Site Locations

Contacts

Networks

View Request Status

Networks Close

Network	Effective Date	Term Date	Status	Print in Directory?
BlueJourney Alliance HMO-Lancaster Chronic Care Special Needs Programs	08-01-2017	12-31-2019	Non participating	<input type="radio"/> Yes <input checked="" type="radio"/> No
Advance PPO Tiered 1	08-01-2025		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Convenience PPO Tiered 1	08-01-2025		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Performance PPO Plus Network	08-01-2020		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Tower Health PPO Tiered Network	10-01-2023		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
CHP HMO Network	07-01-2010		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
KHP Commercial HMO Network	07-01-2005		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Medicare Advantage PPO Network	08-01-2005		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Capital Advantage PPO Tiered 2	08-01-2025		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
CareConnect Network	10-01-2013		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
POS Network	01-01-2002		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
PPO Network	04-01-2002		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Medicare Advantage HMO Network	01-01-2006		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Traditional/Indemnity Network	04-01-2002		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Value HMO Network	08-01-2013	12-31-2017	Non participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
PPO Choice Select Tiered Network 2	07-01-2022		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Wellspan Health Medicare Advantage HMO Partnership	01-01-2022	12-31-2025	Non participating	<input checked="" type="radio"/> Yes <input type="radio"/> No
Wellspan Health Medicare Advantage PPO Partnership	01-01-2022	12-31-2025	Non participating	<input checked="" type="radio"/> Yes <input type="radio"/> No

Showing 1 to 18 of 18 entries

Product participation is displayed. All fields are read only and are informational only.

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View request status

Return to Main Selection

Tax / Facility Information

Facility Name Change

- Facility Addresses

- Primary
- Billing
- Correspondence
- Medical Records
- Remittance

IVR Number

Additional Site Locations

Contacts

Networks

View Request Status

Tax Info Close

Tax ID Tax Entity

Address Line 1 Address Line 2

City State Zip Code County

Phone Number Ext Fax Number Email

Facility Info

Facility Name Facility Type

CBC ID Taxonomy

To access specific provider information select on a facility highlighted in blue, located under the name column.

At any time, all submitted requests can be viewed based upon provider. The view request status screen shows who submitted the request, the date submitted, a brief description of the request, and the status. The tracking ID is helpful if questions arise around the request. The user receives email notifications when a change is submitted, when a change is completed, or if the request is canceled internally. If the change is canceled, the email will include a description of why the request was canceled. All emails include a brief description of the change request including the provider's name and the change effective date.

Provider attestation

[Back to selection](#)
[Update Electronic Funds Transfer](#)
[Update Remittance Information](#)
[View Request Status by Tax ID](#)
[Update Network Info](#)
[Mergers / Acquisitions](#)
[Terminate Facility](#)
 Last Attested on:
 01/20/2026
 Attestation due:
 04/20/2026
[Update Attestations](#)

Facilities for Tax ID
Close

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type

Showing 1 to 1 of 1 entries Previous 1 Next

[Back to selection](#)
[Update Electronic Funds Transfer](#)
[Update Remittance Information](#)
[View Request Status by Tax ID](#)
[Update Network Info](#)
[Mergers / Acquisitions](#)
[Terminate Facility](#)
Last Attested on:
Attestation due:
[Update Attestations](#)

Facilities for Tax ID
Close

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type

Showing 1 to 1 of 1 entries Previous 1 Next

Attestation is required every 90 days. The Last Attested on date indicates the date that last attestation was completed, Attestation Due indicates the date the next attestation is due. If the attestation is past due, information will appear in red and all other functionalities will be suppressed until the attestation is completed.

Please note, if you start the request and leave before finalizing, you may lose all the information that was entered. If the Tax ID is also connected to a Professional record, both the Facility and Professional Attestation will need to be completed for the attestation to be considered complete.

Select *Update Attestation* from the tool bar.

Attestation for Tax ID
Close

Note: If you have both facilities and groups under this tax id, you will need to complete separate attestations for them to be in compliance.

Attestor Information

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Facility Name	Facility ID	Facility NPI	Reviewed and Approved
			No

Showing 1 to 1 of 1 entries

Attestation Date

Comments

System Comments

If you are attesting with changes, you are attesting that you will submit any additional changes within 3 business days

Approve Attestation
Approve Attestation With Changes
Return to Main Selection

Once *Update Attestation* is selected, you will be brought to the screen above. Select hyperlink for facility name listed to begin reviewing the necessary data that must be attested to. Please note, there may be several facilities to review (facility includes all participating facilities associated with the Tax ID selected when logging into the application, which is also available at the top of the screen).

Attestation for Tax ID
Close

Facility Information

Provider ID	Provider Name	Provider Type	Taxonomy	Website

Showing 1 to 1 of 1 entries

Networks

Network	Effective Date	Term Date	Status	Print in Directory?	Accepting New Patients?
BlueJourney Alliance HMO-Lancaster Chronic Care Special Needs Programs	08-01-2017	12-31-2019	Non participating	<input type="radio"/> Yes <input checked="" type="radio"/> No	Open to new patients
Advance PPO Tiered 1	08-01-2025		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Convenience PPO Tiered 1	08-01-2025		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Performance PPO Plus Network	08-01-2020		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Tower Health PPO Tiered Network	10-01-2023		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
CHIP HMO Network	07-01-2010		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
KOP Commercial HMO Network	07-01-2005		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Medicare Advantage PPO Network	08-01-2005		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Capital Advantage PPO Tiered 2	08-01-2025		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients

CareConnect Network	10-01-2013		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
POS Network	01-01-2002		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
PPO Network	04-01-2002		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Medicare Advantage HMO Network	01-01-2008		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Traditional/Indemnity Network	04-01-2002		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Value HMO Network	08-01-2013	12-31-2017	Non participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
PPO Choice Select Tiered Network 2	07-01-2002		Participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Wellspan Health Medicare Advantage HMO Partnership	01-01-2022	12-31-2025	Non participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients
Wellspan Health Medicare Advantage PPO Partnership	01-01-2022	12-31-2025	Non participating	<input checked="" type="radio"/> Yes <input type="radio"/> No	Open to new patients

Showing 1 to 10 of 10 entries

Once you select the facility name, the above informational screens will appear which shows data for the selected facility including networks and site locations. Facility Information and Network sections are display only, if changes are needed to the facility name, that functionality exists within the *Facility Name Change* section outside of the Attestation functionality.

Edit	Service Address Line 1	Line 2	City	State	Zip Code	Phone #	Fax #	Email	Telehealth	Directory Indicator	Primary / Alternate
----------------------	------------------------	--------	------	-------	----------	---------	-------	-------	------------	---------------------	---------------------

Office Hours:					
Day	Open 1	Close 1	Open 2	Close 2	
Monday	8:00 am	5:00 pm			
Tuesday	8:00 am	5:00 pm			
Wednesday	8:00 am	5:00 pm			
Thursday	8:00 am	5:00 pm			
Friday	8:00 am	5:00 pm			

The primary address will be displayed. To edit address or office hours, select *Edit*.

Primary Address
Close

(* indicates required fields)

*Address Line 1 Address Line 2

*City *State *Zip Code *County

Zip Code Lookup: Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code.

Standardize Address: Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards.

For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.

[Zip Code Lookup](#) [Standardize Address](#)

*Is this change the result of a TRN change, acquisition or merger?

Yes No

*Effective Date for requested change
 Effective date applies to address above.

*Phone Number Ext *Fax Number *Public Facing Email

Web address

Handicapped Accessible? Yes No Print In Directory? Yes No

Selecting *Edit* from the previous screen; the above screens will display. Update the information that contains discrepancies and select *Update* to save and submit all necessary changes.

Please note, *Reset* will take the screen back to the original state and *Return to Attestation* will NOT submit any changes and will return the user back to the attestation screen.

If Changes are made, select *Update*. After the address information is updated and submitted, select *Return to Attestation* to go back to the facility information page to continue reviewing the attestation information.

Site Locations

The above screen is a display of the alternate address(es). If any updates are needed, select *Edit*.

Once all information has been reviewed and any necessary updates are submitted, select *Submit Attestation*, which will complete the check for the selected facility. If *Cancel* is selected, it will return the user back to the previous participating attestation listing without approving the review of the selected facility.

Attestation for Tax ID Close

Note: If you have both facilities and groups under this tax id, you will need to complete separate attestations for them to be in compliance.

Attestor Information

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Facility Name	Facility ID	Facility NPI	Reviewed and Approved
			Yes

Showing 1 to 1 of 1 entries

Attestation Date: 01/21/2026

Comments:

System Comments:

If you are attesting with changes, you are attesting that you will submit any additional changes within 3 business days

Facility attestation reviewed, please click 'Approve Attestation' to submit.

Once you select *Submit Attestation* for the facility reviewed, you will be returned to the Attestation screen to continue reviewing any additional participating facilities associated with the Tax ID selected. The facility that was just reviewed and approved, will be marked with a 'Yes' under the Reviewed and Approve column. Each facility listed must be reviewed by completing the steps above to review for accuracy and submit updates for any discrepancies. Please note, there may be several facilities to review.

Once all facilities listed have been reviewed, the column labeled Reviewed and Approved will contain 'Yes' listed next to each facility name. To submit the attestation, select *Approve Attestation* if all information is accurate or any necessary changes have been submitted or select *Approve Attestation with Changes* if changes are identified and cannot be submitted at this time.

Approve Attestation indicates all information is accurate and no further changes need to be made OR changes that needed to be made have been made prior to approving the attestation.

Approve Attestation with Changes indicates that all facilities have been reviewed and changes need to be made but cannot be completed at this time. Detailed comments are required to indicate the necessary changes that will be submitted at a later date. Please note, the submitter will have three business days to make any necessary updates to the facility information before the account will not be able to make any other changes in the application. Submitter is responsible for submitting any necessary updates that were not completed while reviewing the Attestation. Notes provided are just an indicator of what you will be submitting within three days of the completed attestation task.

Return to Main Selection will remove any 'Review and Approved' records that have been reviewed and return you to the main screen, which will NOT submit the attestation request.

Attestation submitted - Trans id: 556de3df-1cdf-4b25-8930-450645e5d6e7-0022

Once you select *Approve Attestation* or *Approve Attestation with Changes*, the attestation request will be submitted and you will be returned to the main screen.

Attestation past due

[Back to selection](#)
Update Electronic Funds Transfer
Update Remittance Information
[View Request Status by Tax ID](#)
Update Network Info
Mergers / Acquisitions
Terminate Facility
Last Attested on:

Attestation due:

[Update Attestations](#)

Facilities for Tax ID

Requestor Information

Effective January 1, 2022, the Consolidated Appropriations Act of 2021 (a Federal Mandate) requires Payors like Capital to establish a process to verify and update their provider directory database at least once every 90 days. **Providers must attest by the Due Date displayed on the screen or will be unable to submit modifications until the attestation is complete.**

Requestor Name Requestor Email Requestor Phone Number

Requestor Title Requestor Fax Number

Select a facility

Facility Name	Facility NPI	CBC Facility ID	Facility Type

Showing 1 to 1 of 1 entries Previous Next

If an attestation is not received within 90 days from, the 'Last Attested on', text will appear in **red**, and functionality of the tool will not be available until the outstanding attestation is reviewed and submitted. Once the attestation is submitted, all functionalities will be available.



Note:

If the Tax ID is also connected to a Professional record, both the Facility and Professional Attestation will need to be completed for the attestation to be considered complete.

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